Substitute for form 1449/PTO (Revised 07/2007) INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)					Complete if Known												
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					First Named Inventor Art Unit Examiner Name		Emmanual Legrand 3724 Payer, Hwei Siu Chou										
									Sheet	1	of 1			Attorney Docket Number		047578/294906	
					. S. PATENT D	OCUMENT	<u>rs</u>										
	0.7	Document Number			Dalification Data	ntion Date Name of Patentee or Applicant of Cited Document		Pages, Columns, Lines, Where									
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